


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000002347
 1. Entity Name
 M & N INVESTMENTS 3, LLC



Principal Place of Business
 505 SOUTH LAKE HOWARD DRIVE
 WINTER HAVEN, FL 33880

Mailing Address
 505 SOUTH LAKE HOWARD DRIVE
 WINTER HAVEN, FL 33880



01252006 No Chg-LLC CR2E083 (11/05)

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4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HINES, JAMES P
 315 S. HYDE PARK AVE.
 TAMPA, FL 33606

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

100000425519
 03/27/06-80022-006 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	OSBORN, NANCY L
STREET ADDRESS	505 S LAKE HOWARD DR
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	MGRM
NAME	OSBORN, MICHAEL M
STREET ADDRESS	505 S LAKE HOWARD DR
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or its receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Nancy L. Osborn* 3-13-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #